

MARIETTA POLICE DEPARTMENT  
ADULT ENTERTAINMENT ESTABLISHMENT EMPLOYEE APPLICATION  
NOTICE OF INTENDED EMPLOYMENT

DATE: \_\_\_\_\_ WORK PHONE: \_\_\_\_\_

BUSINESS NAME: \_\_\_\_\_ HOME PHONE: \_\_\_\_\_

BUSINESS ADDRESS: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_

HOME  
ADDRESS: \_\_\_\_\_

STATE, ZIP CODE: \_\_\_\_\_

DOB: \_\_\_\_\_ PLACE OF BIRTH: \_\_\_\_\_ AGE: \_\_\_\_\_

RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_ EYES: \_\_\_\_\_

HAIR: \_\_\_\_\_ SOCIAL SECURITY: \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ STATE: \_\_\_\_\_

OWNER OF ABOVE BUSINESS: \_\_\_\_\_

YOUR POSITION AT THE BUSINESS: \_\_\_\_\_

LIST DATES AND PLACES OF EMPLOYMENT, WITH ADDRESSES, FOR THE LAST FIVE YEARS:

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HAVE YOU EVER BEEN FINGERPRINTED BEFORE: \_\_\_\_\_ IF YES, EXPLAIN WHY, WHERE  
AND WHEN: \_\_\_\_\_

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HAVE YOU EVER BEEN ARRESTED OR CONVICTED OF ANY ALCOHOL RELATED LAW OR  
ORDINANCE IN THE PAST FIVE YEARS: \_\_\_\_\_ IF YES, EXPLAIN AND LIST POLICE AGENCY  
AND DATE: \_\_\_\_\_

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HAVE YOU EVER BEEN ARRESTED OR CONVICTED OF ANY FELONY DRUG RELATED LAWS  
OR ORDINANCES IN THE PAST FIVE YEARS: \_\_\_\_\_ IF YES, EXPLAIN AND LIST POLICE  
AGENCIES AND DATE: \_\_\_\_\_

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HAVE YOU BEEN ARRESTED OR CONVICTED OF ANY SEX RELATED CRIMES IN THE PAST FIVE YEARS:\_\_\_\_\_IF YES, EXPLAIN AND LIST POLICE AGENCY AND DATE:\_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

LIST ANY AND ALL ALIAS AND STAGE NAMES:\_\_\_\_\_

\_\_\_\_\_

I,\_\_\_\_\_,BEING DULY SWORN ACCORDING TO LAW, DO SWEAR THAT THE FACTS MADE BY ME IN THE ABOVE AND FOREGOING ANSWERS TO QUESTIONS ARE TRUE AND NO FALSE OR FRAUDULENT STATEMENT IS MADE HEREIN.

I UNDERSTAND THAT ANY FALSE OR MISLEADING INFORMATION WILL CAUSE THIS APPLICATION TO BE DENIED.

THIS APPLICATION DOES NOT CONSTITUTE A TEMPORARY LICENSE. YOU WILL NOT BE ELIGIBLE FOR EMPLOYMENT UNTIL THIS APPLICATION IS APPROVED.

DATE:\_\_\_\_\_APPLICANTS SIGNATURE:\_\_\_\_\_

I HEREBY CERTIFY THAT THE ABOVE LISTED APPLICANT WILL BE EMPLOYED AS AN ADULT ENTERTAINMENT EMPLOYEE AT\_\_\_\_\_  
A LICENSED ADULT ENTERTAINMENT ESTABLISHMENT.

DATE:\_\_\_\_\_OWNER/AGENT SIGNATURE:\_\_\_\_\_

**NOTARY**

SWORN TO AND SUBSCRIBED BEFORE ME THIS\_\_\_\_\_DAY OF:\_\_\_\_\_ 200\_

SIGNATURE\_\_\_\_\_

COMMISSION EXPIRES\_\_\_\_\_

WHEN RETURNING THIS APPLICATION, YOU MUST HAVE THE FOLLOWING ITEMS:

1. VALID PICTURE ID; **STATE ID, STATE DRIVERS LICENSE, OR MILITARY ID ONLY.**
2. \$50.00 IN CASH.